

# **ALABAMA FOREIGN LANGUAGE COURT INTERPRETER PROGRAM WRITTEN EXAMINATION INFORMATION**

Interpreters may take the Written Examination on

**Saturday morning, September 21, 2013, 9:00 AM**  
at the following location:

**Heflin-Torbert Judicial Building  
300 Dexter Avenue, Suite 1500  
Montgomery, AL 35223**

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## **IMPORTANT INFORMATION**

The Written Examination Overview is found under the “Interpreter Help” Link Testing heading on our website at [www.alacourt.gov](http://www.alacourt.gov). A Practice Examination Kit may be purchased from the National Center for State Courts at [www.ncsc.org](http://www.ncsc.org), or by calling (757) 259-1591. Questions concerning this examination may be directed to the Alabama Administrative Office of Courts by calling (334) 954-5052; or 1-866-954-9411, ext. 5052.

## **APPLICATION DEADLINE**

**NO LATER THAN SEPTEMBER 16, 2013, WE MUST RECEIVE YOUR COMPLETED APPLICATION AND A CERTIFIED CHECK OR MONEY ORDER IN THE AMOUNT OF \$35.00 MADE PAYABLE TO: Alabama Judicial College Faculty Association. RETURN YOUR APPLICATION AND APPLICATION FEE TO: Alabama Administrative Office of Courts; Foreign Language Interpreter Program; Attn: Winthrop E. Johnson; 300 Dexter Avenue; Montgomery, Alabama 36104.**

# ALABAMA FOREIGN LANGUAGE COURT INTERPRETER PROGRAM WRITTEN EXAMINATION APPLICATION

By timely submission of my application, and application fee (by certified check or money order) in the amount of \$35.00, I am requesting to take the Alabama Foreign Language Court Interpreter Written Examination offered by the Alabama Administrative Office of Courts as selected below:

☐ **Saturday morning, September 21, 2013**

I, \_\_\_\_\_, request to take the Alabama Foreign Language  
Applicant's Name (Please print)

Court Interpreter Written Examination for the following foreign language: \_\_\_\_\_.  
Foreign Language

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Applicant's Telephone Number

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's 2<sup>nd</sup> Telephone Number (if exists)

E-mail address: \_\_\_\_\_

Applicant mailing address: \_\_\_\_\_  
Street or Apt No.

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Upon timely receipt and approval of this application, the applicant will receive written confirmation of an exam time and location as scheduled.